

April 15, 2013
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LIFENET INSURANCE COMPANY
(Securities Code: 7157, TSE Mothers)

FY2012 4Q: INSURANCE PAYMENTS REPORT

2,356 payments for FY 2012

TOKYO, April 15, 2013 - LIFENET INSURANCE COMPANY (TSE Mothers 7157, President/Founder: Haruaki Deguchi, URL: http://ir.lifenet-seimei.co.jp/en/) announces the report on the number of insurance payments for the fourth quarter of fiscal year 2012, ended March 31, 2013.

The number of insurance payments made in the fourth quarter of FY2012 resulted in 661 cases, 8 of which were insurance claims and the remaining 653 benefit claims. There were 26 incidents which were assessed to be inapplicable during the same quarter. As a result, the number of insurance payments made in FY 2012 resulted in 2,356 cases, 18 of which were insurance claims and 2,338 benefits, and there were 96 incidents which were assessed to be inapplicable during the same period.

Lifenet believes the most important responsibility for an insurance company is for claim payments to be made accurately and without delay, and we thrive to continue to accomplish this. Lifenet makes every effort possible to ensure payment of insurance claims and benefits are made to the designated account within 5 business days of receiving all necessary documents. In FY 2012, the average insurance payment was made in 3.25 business days.¹

Lifenet has simplified the conditions under which claimants can make medical policy claims by removing medical certificates or other certificates signed by a doctor from October 2, 2012.² With this new process, we were able to eliminate the period of time from when a request is made to a medical institution for documents to the issuance of such documents, and the time required for the payment of medical benefits has been shortened considerably from 43 days³ to 23 days⁴ on average. Due to this, claimants additionally were able to save around 5,000 yen in costs⁵, time and effort, while medical institutions who prepare the medical certificates were able to save considerable time and effort.



Number of insurance payments and those which assessed inapplicable FY2012 (April 2012 – March 2013)

	"Kazoku"				"Jibun"			
	Death benefit	Invalid care benefit	Waiver of premium	Total	Hospitali zation benefit	Surgery benefit	Waiver of premium	Total
Insurance payments	17	1	_	18	1,675	579	1	2,255
Inapplicable cases	7	_	_	7	58	27	_	85
Fraud	1	_	_	1	_	_	_	
Illegal acquisition	_	_	_	_	_	_	_	
Breach of disclosure duty	_	_	_	_	20	11	_	31
Criminal intent	_	_	_	_	_	_	_	_
Exemption from responsibility	6	_	_	6	_	_	_	-
Request not covered by policy	_	_	_	_	38	16	_	54

	"Jibun Plus"						"Hataraku-Hito"		
	In-patient care benefit	Out-pati ent benefit	Cancer treatment benefit	Advanced medical care benefit	Waiver of premium	Total	Disability benefit ⁶	Total	
Insurance payments	20	9	_	_	_	29	54	2,356	
Inapplicable cases	1	1	_	_	_	2	2	96	
Fraud	_	_	_	_	_	_	_	1	
Illegal acquisition	_	_	_	_	_		_	_	
Breach of	_	_						1	32
disclosure duty				_		_		-	32
Criminal intent	_	_	_	_	_			_	
Exemption from	_								6
responsibility		_	_					0	
Request not	1	1 1		_	_	2	1	57	
covered by policy		ı	'				2	'	31



Quarterly trend of the number of insurance payments

	-	Insurance payments	Inapplicable cases	
FY 2012	4Q (JanMar. 2013)	661	26	
	3Q (OctDec. 2012)	678	43	
	2Q (JulSep. 2012)	537	8	
	1Q (AprJun. 2012)	480	19	
FY 2011	4Q (JanMar. 2012)	432	20	
	3Q (OctDec. 2011)	347	12	
	2Q (JulSep. 2011)	262	9	
	1Q (AprJun. 2011)	243	15	
FY 2010	4Q (JanMar. 2011)	193	10	
	3Q (OctDec. 2010)	150	5	
	2Q (JulSep. 2010)	95	4	
	1Q (AprJun. 2010)	67	10	
FY 2009	4Q (JanMar. 2010)	55	2	
	3Q (OctDec. 2009)	36	6	
	2Q (JulSep. 2009)	35	2	
	1Q (AprJun. 2009)	17	0	
FY 2008	4Q (JanMar. 2009)	7	1	
	3Q (OctDec. 2008)	1	1	
	2Q (JulSep. 2008)	3	0	
	1Q (AprJun. 2008)	0	0	

- 1: Does not include the number of days required to obtain missing documents. Cases which required fact confirmation before insurance payments were made are not included when calculating the average number of days required for payment.
- 2: Note that in the following cases, Lifenet may require the submission of medical certificates or request to a medical institution, etc. for the confirmation of facts:
 - ✓ In cases where submission of a medical treatment statement is not possible
 - ✓ In cases where the claimant is not the insurance carrier (an assigned claimant, etc.)
 - ✓ In cases of specified injuries and diseases (cancer, etc.) stipulated by Lifenet
 - ✓ In cases where a treatment period exceeds the period stipulated by Lifenet
- 3: Based on our data on medical policy claims received from the commencement of business to August 2012.
- 4: Based on our data on medical policy claims without medical certificates received from October 2, 2012 to March 31, 2013.
- 5: Based on "2007 Research on Documentation Fees at Medical Institutions" issued by SANRO Research Institute, Inc.
- 6: The number of benefit payments for long-term disability is a total of all monthly individual claim applications during the specified period, and may differ from the number of payments and/or number of claimants. From April, 2012 to March 2013, the number of claimants who were paid disability benefits was 11.



About LIFENET URL: http://ir.lifenet-seimei.co.jp/en/

Returning to the original purpose of life insurance - mutual support - LIFENET INSURANCE was founded with the goal of offering simple, convenient and competitively priced products and services based on the highest levels of business integrity. We sell these products and services directly to customers over the Internet. By using the Internet, we are able to offer highly cost-competitive products and accept applications from customers at any given time.

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